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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Rublic Inspection

			ndar Indatio	year 2015, or tax year beginnin	9 A	ug 1 , 2015 ,	and ending Ju]	. 3 A	1 , 2016 Employer identification num	her
	VARA Educational Foundation, Inc. Number and street (or PO box number if mail is not delivered to street address)							23-7336991		
			stree x 7		to street a	ddress)	Room/suite	В	Telephone number (see instru (802) 236-469	•
	City o	or town	, state	or province, country, and ZIP or foreign posi-	al code			c	If exemption application is p	
			toc kall	k that apply. Initial return	г	Initial return of a forme	UJUJI		. ,, ,	· -
	G	Once	A all	Final return	}	Amended return	ar public charity	D ·	1 Foreign organizations, chec	k here ▶ ∐
				Address chang		Name change		:	2 Foreign organizations meet here and attach computatio	
	H	Chec	¬ ´`			(c)(3) exempt private fou			·	ب
	Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at end of year J Acco				ounting method: X C		E	If private foundation status under section 507(b)(1)(A),		
	•	(from	Part I	l, column (c), line 16)	_	Other (specify)	L-J (F	If the foundation is in a 60-r	nonth termination
	 	^ \$		196,871.	(Part I,	column (d) must be on c			under section 507(b)(1)(B),	check here ▶
ļ	Pa	rt i		nalysis of Revenue and penses (The total of amounts)	n	(a) Revenue and expenses per books	(b) Net investment income		(c) Adjusted net income	(d) Disbursements for charitable
			col sai	umns (b), (c), and (d) may not ne rily equal the amounts in column (e instructions).)	ces-	expenses per books	income		income	purposes (cash basis only)
			1	Contributions, gifts, grants, etc, received (attach sche		15,000.				3.7.1/68/14/05/05/34
			2	Ck ►If the foundation is not required to at	ach Sch B					
			3	Interest on savings and temporary cash investments		80.		<u>o.</u>	80.	
		İ	4 5 a	Dividends and interest from secunties		13,495.	13,49	5.	13,495.	
			b	Net rental income or (loss)			(#		. (*) (*)	
	F			Net gain or (loss) from sale of assets not on line 10 Gross sales price for all						
	\	/	7	assets on line 6a	1		7,58	2		
	E	1	8	Net short-term capital gain Income modifications CEIVED	, , , , .		7,50	٠.	0.	1, 200
	L E		9 10 a	Gross sales less	:: ·	٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠	1 1/4 1/2 .		4 < 800 24 8 8 1 / / ·	20 T
				allowances	Š	**	}			*
			_	Less design DEC 2 0 2016	S)		* .			
در.			_	Gross profit or (loss) (attach schedule) Other income (affact) schedule			** ** * * *			
<u></u>			•	Other income (attached the N; UT						
		\rightarrow	12	Total. Add lines 1 through 11		28,575.	21,15	7.	13,575.	
			13 14	Compensation of officers, directors, trustee Other employee salaries and wages .						
			15	Pension plans, employee benefits						
		A		Legal fees (attach schedule) Accounting fees (attach sch) L – $16b$			40	_	400	
いにを記るマック		M		Other prof fees (attach sch)		480.	48	0.	480.	
	Q	N	17	Interest						
ديم	E R	S T R A T		Taxes (attach schedule)(see instrs) Federa.	L. tax.	405.	40	5.	405.	
E)	Ŷ		19	Depreciation (attach schedule) and depletion						1.36a 34 56
	N G	¥	20	Occupancy						
			21 22	Printing and publications						· · · · · · · · · · · · · · · · · · ·
	A N D	E P E	23	Other expenses (attach schedule)	_	1 0 = 1			1 051	
		N S	24	Investment Total operating and administrative	fees	1,854.	1,85	4.	1,854.	
		N S E S		expenses Add lines 13 through 23		2,739.	2,73	9.	2,739.	
			25 26	Contributions, gifts, grants paid		20,000.		2.43	*	20,000.
			26	Add lines 24 and 25		22,739.	2,73	9.	2,739.	20,000.
		Ī	27	Subtract line 26 from line 12 Excess of revenue over expenses			**************************************	(† 1)		
			d	and disbursements		5,836.	,\$, \$ · · · · · · · · · · · · · · · · ·			Marin.
				Net investment Income (if negative, enter	•		18,41	8.		ANNES ALL
			С	Adjusted net income (if negative, enter -0)	* * * *	* * · `		10,836.	-

Par	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	r year
<u></u>		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	6,448.	6,563.	6,563.
	2	Savings and temporary cash investments			
	3	Accounts receivable			1.2.6.2.1.1
	1	Less allowance for doubtful accounts	I was an a sum of the make	an a Philippine a destrument com della committation in the desire in	
	4	Pledges receivable	* 3 / *		10 m
		Less: allowance for doubtful accounts		<u></u>	1827
	5	Grants receivable	 	 	
	6	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		N & W 10 10 20 20	
A		Less: allowance for doubtful accounts	3 72 72 22 22 23 5 76 22	1 20 200 W 100 1 24 00011	
A S S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			
S	10	a Investments – U S and state government obligations (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	1 :	b investments — corporate stock (attach schedule)			
	1	c Investments — corporate bonds (attach schedule)			
	l l	Investments – land, buildings, and	* * * * * * * * * * * * * * * * * * *		N N N N N N N N N N N N N N N N N N N
		equipment basis			
		Less accumulated depreciation (attach schedule)			
	12				ļ
	13	Investments — other (attach schedule) L=13. Stmt		166,060.	190,308.
	14				
		Less accumulated depreciation (attach schedule)			
	15				
	16	see the instructions. Also, see page 1, item l)	159,205.	172,623.	196,871.
Ļ	17	· · · · · · · · · · · · · · · · · · ·			
Ä	18	Grants payable			
В	19	Deferred revenue			
Ė	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
- 1	22	Other liabilities (describe			
E S	23				
		Foundations that follow SFAS 117, check here X and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	159,205.	172,623.	
E U	25	Temporarily restricted			
D	26	Permanently restricted			
A S B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund $\dots \dots$			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
ŔŜ	30	Total net assets or fund balances (see instructions)	159,205.	172,623.	
	31	Total liabilities and net assets/fund balances (see instructions).	159,205.	172,623.	
Par	t 111	Analysis of Changes in Net Assets or Fund Balance			
1	Total	I net assets or fund balances at beginning of year — Part II, column of-year figure reported on prior year's return)	(a), line 30 (must agree v	vith	159,205.
2		or amount from Part I, line 27a			5,836.
3		Increases not included in line 2 (itemize) Capital gain of		3	7,582.
4		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			172,623.
_	Doore	once not included in line 2 (Homiss)			1/2,023.
6	Total	I net assets or fund balances at end of year (line 4 minus line 5) — P	Part II. column (b) June 30		172,623.
<u> </u>		This is a second of the control of t	Sit ii, coldinii (D), lille 30		1 12,023.

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Part I\	/	∟osses for Tax on Investmer	nt Income			
,	(a) List and describe	the kind(s) of property sold (e.g., real , or common stock, 200 shares MLC	estate.	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a Ar	merican Cap Inc Bu	ilder)	06/12/09	07/19/16
	imco Total Return			>	06/12/09	07/19/16
	V Large Cap			?	various	05/09/16
d ∇:	ictory Diversified	Stock A		· · · · · · · · · · · · · · · · · · ·	various	05/09/16
	ee Columns (a) thru (d)				<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) m	
a	2,500.			,799.		701.
b	3,000.		2	994.	 	6.
C	2,958.			3,027.		-69.
d	3,373.			3,512.		-139.
e	See Columns (e) thru (h)	<u> </u>		2,181.		7,083.
		g gain in column (h) and owned by th			(I) Gains (Co	ol (h)
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	ti	gain minus col (k), b nan -0-) or Losses (f	out not less rom col (h))
а						701.
b					·· 	6.
c			—			-69.
d						-139.
е е	See Columns (ı) thru (l)					7,083.
2 Ca	ipital gain net income or (net c	capital loss) If gain, also If (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	2		7,582.
3 Ne	et short-term capital gain or (lo	ss) as defined in sections 1222(5) and	q (9).			
lf g	gain, also enter in Part I, line 8 Part I, line 8	, column (c) (see instructions) If (loss	s), enter -0-	3		-208.
		Section 4940(e) for Reduce		ent Income		
	n 4940(d)(2) applies, leave this	oundations subject to the section 494 s part blank.	,	,		
Was the	foundation liable for the section	on 4942 tax on the distributable amou	nt of any year in the base ne	nod2	Yes	X No
		under section 4940(e) Do not comp				<u></u>
		each column for each year, see the ir		v entries		
	(a)	(b)	(c)	1	(d)	
Cal	Base periód years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets (col	Distribution (b) divided by c	n ratio :ol. (c))
	2014	22,200.	148	3,613.		0.149381
	2013	21,300.		,152.		0.112016
	2012	25,400.		,550.		0.143058
	2011	20,950.		6,622.	·	0.126493
	2010	30,594.		,692.		0.190389
2 To	tal of line 1, column (d)					0.721337
3 Ave	erage distribution ratio for the	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the			0.144267
	•	·				
		ble-use assets for 2015 from Part X,			 	194,973.
5 Mu	iltiply line 4 by line 3			5	-	28,128.
6 Ent	ter 1% of net investment incor	me (1% of Part I, line 27b)		· · · · 6		184.
7 Add	d lines 5 and 6			7	1	28,312.
					1	20,312.
8 Ent	ter qualifying distributions from	n Part XII, line 4		8		20,000.

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	nstri	uctions	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1		, 25			沒數
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)					
k	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			36	68.
	check here . ► and enter 1% of Part I, line 27b		, s	V (A)	14.	57. A
ď	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	£	. سفاد شد		***	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
3	Add lines 1 and 2	3			36	68.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			36	68.
6	Credits/Payments.	. %	1 1 m			- 3
a	2015 estimated tax pmts and 2014 overpayment credited to 2015				*	
	Exempt foreign organizations — tax withheld at source				10.04	300
c	Tax paid with application for extension of time to file (Form 8868)				(4)	
	Poolun withholding grang withhold		() () 3. ()		¥.	
7	Total credits and payments Add lines 6a through 6d	7	\$200 A	në sësi i		
8	Enter any penalty for underpayment of estimated tax. Check here	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			3,4	68.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	The state of the s	11				<u> </u>
_	t VII-A Statements Regarding Activities	'' -	L			
				\$1.4	Yes	No
7 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a	103	X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?		$\cdot \cdot \cdot $	1 c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation > \$ (2) On foundation managers > \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on					33
•	foundation managers > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	- 2001	X
	If 'Yes,' attach a detailed description of the activities.				AN	ন্ <u>থী</u>
3	·					
_	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes				12.34.74.82.4.5.4.7.	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ł	4 a		X
t	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		$ \cdot \cdot \cdot $	5		Х
	If 'Yes,' attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV		- 1	7	$\frac{x}{x}$	
	Enter the states to which the foundation reports or with which it is registered (see instructions)		1	.53		2350
			-			. 7
	If the angular is Vac' to line 7, has the foundation furnished a copy of Form 000 DF to the Attended Comment		- 1			
£.	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X	ecesiii
_						k : 152
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part X	(5) /V		9		X
		•		 +		
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10	}	v
BAA		· · ·		m 990	-PF (2)	X 015)
-					· /	/

Form	n 990-PF (2015) VARA Educational Foundation, Inc.	23-733699	1	Pa	age 5
Par	rt VII-A· Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		_X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement (see instructions)	son had	12		х
13			H	Х	
	Website address	<i></i>			
14	The books are in care of Margie Straub Telephone	no. ► <u>(802)</u>	_2 <u>36</u>	- <u>469</u>	<u>5</u>
4-	Localed at PO Box 7/4 Woodstock VT ZIF+4	0203T			-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year				Ш
40				Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	overa	16	X 6: 2 - 2 W	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		¥\$\$\$	Yes	No
1 a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		- 4	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	Yes X No	5.0		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the				
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
	• • • • • • • • • • • • • • • • • • • •				
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1 b	J 5000000000	.8.5 .28 81
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	à \$	2	
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		1 c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a				
	private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
ě	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes XNo			
	If 'Yes' list the years ▶ 20 , 20 , 20 , 20, 20		M.,		
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)		2 b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1777		100
	► 20 , 20 , 20 , 20 .		Nis.		j,
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business				
	enterprise at any time during the year?	Yes X No			
ì	b If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation				
	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or				
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)		3 b	-w	المناسد در يستند
4			-		
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		х
	b Did the foundation make any management of the Color of		^ . 4	13	12.30 1 10
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of				
	the tax year beginning in 2015?		.i 4b	1	ΙX

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Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued	<u> </u>	
5 a During the year did the foundation pay or incur a	•			}	
(1) Carry on propaganda, or otherwise attempt to	,	, ,,	· · · · Yes	X No	
 (2) Influence the outcome of any specific public on, directly or indirectly, any voter registration (3) Provide a grant to an individual for travel, stu 	n drive?			X No	
	∐ No ੈ				
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).				X No	
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nimals?	· · · · Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance			5 b X
Organizations relying on a current notice regarding	ng disaster assistance ch	neck here			22
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	on from the	· · · · TYes	☐ No	
If 'Yes,' attach the statement required by Regulat	tions section 53.4945-5(d	t).	_		
6 a Did the foundation, during the year, receive any to on a personal benefit contract?			<u>L</u>	X No	
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?		6b X
If 'Yes' to 6b, file Form 8870.			П.,	,	
7 a At any time during the tax year, was the foundation			—		
b if 'Yes,' did the foundation receive any proceeds					7b
Part VIII Information About Officers, D and Contractors	irectors, i rustees,	Foundation Manag	gers, Hignly Pai	a Employ	rees,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	t othe	ense account, er allowances
Tao Smith					
PO Box 509	President				
Killington VT 05751	0.00	0.		0.	0.
Lynn Sullivan					
PO Box 187	Treasurer				
Jacksonville VT 05342	0.00	0.	(0.	0.
Abby Copeland					
PO Box	Secretary	_		_	_
Woodstock VT 05091	0.00	0.		0.	0.
Brian Sherras	Vice Chair	H			
PO Box Cavendish VT 05142	Vice Chair 0.00	0.	1	o.	0.
2 Compensation of five highest-paid employee	, , , , , , , , , , , , , , , , , , , 				
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to		ense account,
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred compensation	t i oth	er allowances
none					
				-	
				- 	
				1	
			 		
			1		
	<u> </u>	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000.			<u> </u>	· <u>^</u>	None

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Rart VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	<u></u>
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	<u> </u>
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Scholarships awarded to approximately 30 eligible	
recipients to pay tuition and related expenses to	
ski academies and ski clubs	20,000.
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments See instructions	
3	
Total Add lines 1 through 2	
Total. Add lines 1 through 3	Form 990-PF (2015)
	

	see instructions.)		
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	1 a	191,436.
t	Average of monthly cash balances	1 b	6,506.
c	Fair market value of all other assets (see instructions)	1 c	
C	l T ota l (add lines 1a, b, and c)....................................	1 d	197,942.
€	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	111	
2	Acquisition indebtedness applicable to line 1 assets		
3	Subtract line 2 from line 1d	3	197,942.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,969.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	194,973.
6	Minimum investment return. Enter 5% of line 5	6	9,749.
Pai	tixl Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here	found	ations
1	Minimum investment return from Part X, line 6	1	9,749.
2 a	Tax on investment income for 2015 from Part VI, line 5 · · · · · · · · ·	200	
t	Income tax for 2015 (This does not include the tax from Part VI)		
•	Add lines 2a and 2b	2 c	368.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,381.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9,381.
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	9,381.
Pai	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·		20,000.
t	Program-related investments — total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3	Amounts set aside for specific charitable projects that satisfy the	. 3a	
ŀ	Cash distribution test (attach the required schedule)	. 3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	20,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	20,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forqualifies for the section 4940(e) reduction of tax in those years.	oundation	1

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Form 990-PF (2015)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7.	^	**************************************		9,381.
2	Undistributed income, if any, as of the end of 2015		32.		4.500
	Enter amount for 2014 only	د به محک د ۱۳۰۰ م	Market of the second	7,026.	10.248
b	Total for prior years 20 , 20 , 20	4 ~ ; , ^			
3	Excess distributions carryover, if any, to 2015				7573763
а	From 2010				. 1917
b	From 2011 20,950.				
	From 2012 25, 400.				
	From 2013 3,091.				
	From 2014	622 / M.S. 5. 36			
f	Total of lines 3a through e	102,297.			190
4	Qualifying distributions for 2015 from Part				
	XII, line 4: \$ 20,000.	. `			
а	Applied to 2014, but not more than line 2a			W. V. A. M. M.	
b	Applied to undistributed income of prior years (Election required — see instructions)				
	Treated as distributions out of corpus (Election required — see instructions)				
	Applied to 2015 distributable amount		3 \$ ^		
	Remaining amount distributed out of corpus	20,000.	\$\$*:::::::::::::::::::::::::::::::::::		
5	Excess distributions carryover applied to 2015 (If an amount appears in column (d), the				
	same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	122,297.	X 423 43 43 43 44		
b	Prior years' undistributed income Subtract line 4b from line 2b		0.		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	<i>4</i> /, 4 <			
d	Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e	Undistributed income for 2014 Subtract line 4a from				
	fine 2a Taxable amount — see instructions	2:11:4	883V1545757571	7,026.	.er 3
f	Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016	. he w			9,381.
7	Amounts treated as distributions out of		·		7,301.
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	30,656.			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	91,641.			
10	Analysis of line 9	~^! * · · · ·	× 3,	14 1 1 2 2 2 2 2 2 2 2 3 2 3 2 3 2 3 2 3 2	ir and Girls 4.
а	Excess from 2011 20,950.	673° "	Karan Karan		
b	Excess from 2012 25,400.		1 . 5 4		
C	Excess from 2013 3,091.		MANANCE AND STATE OF THE PARTY		
	Excess from 2014 22,200.	1 (, , , , , , , , , , , , , , , , , ,		(THE BASE	
	Excess from 2015		<u> </u>		
BAA	·				Form 990-PF (2015)

Form	990-PF (2015) VARA Educational	Foundation,	Inc.		23-7336991	Page 10
	XIV Private Operating Foundati					N/A
	If the foundation has received a ruling or determined the for 2015, enter the date of the ruling the ruling the for 2015, enter the date of the ruling the formal of the ruling the formal of the ruling the formal of the formal	g		• • • • • • • • •	<u></u> • [
	Check box to indicate whether the foundation		ng foundation descri		4942(j)(3) or	4942(j)(5)
Za	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(L) 2014	Prior 3 years	1.0.2012	(a) Total
	Investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	85% of line 2a			 		
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	'Assets' alternative test — enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
	'Support' alternative test – enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Par	Supplementary Information	Complete this	part only if the	foundation ha	d \$5,000 or more	in
1	assets at any time during the Information Regarding Foundation Manage		istructions.)			
	List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more	than 2% of the total n \$5,000). (See secti	contributions receive ion 507(d)(2).)	ed by the foundation b	efore the
b	List ariy managers of the foundation who own a partnership or other entity) of which the four	10% or more of the	e stock of a corporator or greater interest	tion (or an equally la	rge portion of the own	ership of
	Information Regarding Contribution, Grant Check here if the foundation only mal requests for funds. If the foundation makes gi complete items 2a, b, c, and d	kes contributions to fts, grants, etc (see	preselected charita e instructions) to indi	ble organizations an viduals or organization	ons under other condit	olicited uons,
а	The name, address, and telephone number of VARA Scholarship Committee PO Box 774	r e-mail address of	the person to whom	n applications should	be addressed.	
	Woodstock	VT 0509	1 (80	02) 236-4695		
b	The form in which applications should be sub					
	see application on VARA web	osite www.va	ara.org			
C	Any submission deadlines: October 15					
d	Any restrictions or limitations on awards, such none	as by geographic	al areas, charitable f	ields, kınds of ınstıtu	tions, or other factors	

			If recipient is an individual,	Foundation		
Recipient	h		show any relationship to any foundation manager or	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or a Paid during the year	busines		substantial contributor	 	 	
Ava Mattson						
PO Box 176						
Bridgewater	VT	05034	none	N/A	travel/scholarship	750
Shane Alercio					-	
98 Pinnacle Ridge				1		
Rutland	VT	05701		N/A	scholarship	500
Nicholas Krause						
10 Buckhill Rd. Northborough	MA	500		N/A	travel	250
Hanako Kusumi	LIFY	300		N/A	Clavel	250
PO Box 440						
Stratton	VT	05155		N/A	scholarship	750
Hannah Utter						
PO Box 1118						
Waitsfield	VT	05673		N/A	travel/scholarship	250
Andy Kenosh 401 Pennock Lane				İ		
Rutland	VT	05701		N/A	travel/scholarship	500
Ann Diefenback	V T	03701		N/ A	craver, schorarship	300
1888 Campbell's Rd			}	Į.		
Bethel	VT	05032		N/A	travel/scholarship	500
Anna Duffy			İ			
85 Burnt Mountain Rd		05654				500
Warren	VT	05674		N/A	travel/scholarship	500
Austin Lilley PO Box 515						
Bondville	VT	05340		N/A	travel/scholarship	250
See Line 3a statement						
						15,750
			<u> </u>			
b Approved for future payment		· · · · ·	T	· · · · · ·	3a	20,000
b Approved for future payment						
				1		
					1	
					1	
				1		

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelated business income			d by section 512, 513, or 514	(.)	
•	ogram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions.)	
a							
b							
c							
d				ļ			
e				-			
· • • —							
	es and contracts from government agencies						
	embership dues and assessments						
	erest on savings and temporary cash investments			-	·	80.	
	vidends and interest from securities		4 ¥1 .		7.9 S 8 8 0 0 7 4	13,495.	
	et rental income or (loss) from real estate	734.7		¥ *7 ·			
	ebt-financed property						
	ot debt-financed property						
	t rental income or (loss) from personal property her investment income	ļ					
				 			
	in or (loss) from sales of assets other than inventory		<u> </u>	 -		 	
	et income or (loss) from special events			-			
	oss profit or (loss) from sales of inventory	* 3 3					
	her revenue:			. **			
a			 	 		 	
ь_		ļ		 			
<u>-</u> _			 	-			
d		 		 		 	
e	ibtotal Add columns (b), (d), and (e)			+ ***		13,575.	
	otal. Add line 12, columns (b), (d), and (e)		<u> </u>	<u> 1° 38 % ∠ .</u>	13	13,575.	
	rksheet in line 13 instructions to verify calculations					13,373.	
							
Part X	VI-B Relationship of Activities to the	e Accomp	lishment of Exem	pt Pur	ooses		
Line N	o. Explain below how each activity for which inco	ome is repor urposes (oth	ted in column (e) of Part ier than by providing fund	XVI-A co	ontributed importantly to ch purposes). (See instr	the uctions)	
3	Provided income for the purp	oose of	scholarshin				
4	Provided income for the purp					· · · · · · · · · · · · · · · · · · ·	
	FIGURE 101 the purp	0000 01	Deliotatbilip				
					· 		
							
_							
					<u> </u>		
		·					
		·- ,			· <u></u>		
BAA		TEE	A0502 10/13/15			Form 990-PF (2015)	

Form 990-PF (2015) VARA Educational Foundation, Inc. 23-7336991

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

-								Yes No
1 Di	id the organization direc	tly or indirectly enga	ge in any of the following v	vith any other o	rganization			76
re-	lating to political organiz	c) of the Code (other	than section 501(c)(3) org	janizations) or i	n section 527,			
	•	_	oncharitable exempt organ					4.94
(1) Cash						. 1 a (1)	X
(2) Other assets				<i>.</i>		. 1 a (2)	Х
	ther transactions:							
								I
			t organization					X
(2	 Purchases of assets t 	from a noncharitable	exempt organization				. 1 b (2)	X
(3) Rental of facilities, eq	uipment, or other as	sets		<i></i> .		. 1 b (3)	Х
								X
•	•	_						
								X
(6	Performance of services	ces or membership o	or fundraising solicitations.	• • • • • •			. 1 b (6)	X
c SI	haring of facilities, equip	ment, mailing lists, o	other assets, or paid emplo	yees			1 c	
th	e goods, other assets, o	or services given by	plete the following schedu the reporting foundation. If an column (d) the value of	the foundation	received less that	n fair market valu	t value of e เก	
(a) Line			noncharitable exempt organizat	 		fers, transactions, and	d sharing arran	gements
(-)	(a) variount involve	(a) radiile of	nononumano onompi organiza	(4)	Sosonphon or trails	, manademona, an	- Jilaning andi	901101113
_	-							
	1			1				
								, <u></u>
								
								· · · · · · · · · · · · · · · · · · ·
					_			
			- ··					
2 a is	the foundation directly	or indirectly affiliated	with, or related to, one or	more tax-exem	pt organizations			
			than section 501(c)(3)) or	In section 527	<i>.</i>		Ye	s XNo
b If	'Yes,' complete the follo	wing schedule.						
	(a) Name of organiz	zation	(b) Type of organia	zation	(c	Description of re	ationship	
			· · · · · · · · · · · · · · · · · · ·		•	· · · · · · · · · · · · · · · · · · ·		
					 		 	
								
·								
					-			
	I lada asalba afaa I da					-1 -6 1 1	I had a final and a second	
	correct, and complete Declara	cuare that I have examined ation of preparer (other than	l this return, including accompanyin i taxpayer) is based on all informati	g schedules and sta on of which preparel	tements, and to the be has any knowledge	st of my knowledge and	Dellet, it is true,	
Sign		` 1			. , .	VAQA	May the	IRS discuss
Here	1 _ (11.	1.01	~ l	<u>\</u>	Merch	 this return 	n with the
	54010100	ulivan	12/1	5116	WOG SILVE	7 H400 F1	preparer (see inst	shown below ructions)?
	Signature of officer or truste	e	Date 7	/ 7	itle		_ ,	Yes No
	Print/Type preparer	s name	Preparer's signature		Date	Check of	PTIN	 -
				1. 1	11/1			=
Paid	Lawrence	E. Reed, CPA		reaxcun	141416	self-employed	P0127	2907
Prepa	rer Firm's name	LAWRENCE E	REED CPA PC		•	Firm's EIN		
Use O		PO BOX 760						
JJG U	,,,,,			77m 05	142 0760	Phone no (80	2) 075	222
		CHESTER		VT 05	143-0760	1 110110 110 (80	<u>2) 875-</u>	
BAA							Form 99	0-PF (2015)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization		Employer Identification number
VARA Educational Foundation	n, Inc.	23-7336991
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizati	tion
	4947(a)(1) nonexempt charitable trust no	t treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treation	ated as a private foundation
	501(c)(3) taxable private foundation	·
Check if your organization is covered by the	General Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the General Ri	ule and a Special Rule. See instructions
General Rule		·
Alternative Control of the Control o	EZ, or 990-PF that received, during the year, contrib	butions totaling \$5,000 or more (in money or
property) from any one contributor Comp	plete Parts I and II. See instructions for determining	a contributor's total contributions.
Special Rules		
For an organization described in section	501(c)(3) filing Form 990 or 990-EZ that met the 33-	-1/3% support test of the regulations
received from any one contributor, during	A)(vı), that checked Schedule A (Form 990 or 990-Ea g the year, total contributions of the greater of (1) \$5	Z), Part II, line 13, 16a, or 16b, and that 5.000 or (2) 2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Form 9	990-EZ, line 1 Complete Parts I and II	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	504(a)(7) (0) as (40) files Faces 000 as 000 F7 II a	A
during the year, total contributions of mor	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re than \$1,000 exclusively for religious, charitable, s	it received from any one contributor, scientific, literary, or educational
purposes, or for the prevention of cruelty	to children or animals. Complete Parts i, II, and III	•
For an organization described in section	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that	It received from any one contributor,
\$1,000 If this box is checked, enter here	of for religious, charitable, etc., purposes, but no such the total contributions that were received during the	n contributions totaled more than e year for an exclusively religious
charitable, etc., purpose. Do not complete	te any of the parts unless the General Rule applies	to this organization because
it received nonexclusively religious, chari	table, etc , contributions totaling \$5,000 or more dur	ring the year · · · · · · ▶ Ş
.		
Caution. An organization that is not covered 990-PF), but it must answer 'No' on Part IV.	by the General Rule and/or the Special Rules does line 2, of its Form 990, or check the box on line H of	s not file Schedule B (Form 990, 990-EZ, or f its Form 990-EZ or on its Form 990-PF.
Part I, line 2, to certify that it does not meet the	he filing requirements of Schedule B (Form 990, 990	0-EZ, or 990-PF)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
•	Educational Foundation, Inc.	' '	r Identification number
Rart I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VT Alpine Racing Association PO Box 774 Woodstock VT 05091	\$ <u>_15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEEA0702 40/42/45	Schedule B (Form 9	900 990-F7 or 990-PE) /2015)

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
EV Large Cap	Р	06/12/09	05/09/16
Victory Diversified Stock A	P	06/12/09	05/09/16

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (e) thru (h)

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
26,426.		27,039.	-613.
32,838.		25,142.	7,696.
Total		52,181.	7,083.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (I)

Complete only for assets by the foundation on 12/3		(h) and owned	(I) Gains (column (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) or losses (from column (h))
			-613. 7,696.
Total			7,083.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year Ben Ritchie PO box 299 Waitsfield VT 05673		 N/A	travel/scholarship	Person or Business 1,000.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Bobby Ryan				Person or
29 Linden Ave	-			Business
Red Hook NY 12571		N/A	travel/scholarship	1,000.
Carver Provance	-			Person or
288 Heald Rd Proctorsville VT 05153				Business
Proctorsville VT 05153 Cole Palchak)	N/A	travel/scholarship	500.
PO_Box_117	-			Business
Bakersfield VT 05441	-		travel/scholarship	750.
Ella Hubbard		11/11	cravery senorarship	Person or
1897 Center Fayston Rd.				Business
Moretown VT 05660		N/A	travel/scholarship	750.
Emma Finfer				Person or
1 World Cup Circle	-			Business
South Londonderry VT 05155	5	N/A	travel/scholarship	500.
Ethan Maiden	-			Person or
183 Blankey Cottage Lane	-			Business
Woodstock VT 05091	-	N/A	travel/scholarship	750.
Forest Van Dine	-			Person or
707 Calendar Brook Rd Lyndonville VT 05851	-			Business
Izzy Jenne		i N/A	travel/scholarship	1,000.
312 Oak Chapel rd	-			Business
Bridgewater Corners VT 05035		N/A	travel/scholarship	1,250.
Jack Despres		1 11/11	craver, benefulship	Person or
PO Box 902	-			Business
Waitsfield VT 05673		N/A	travel/scholarship	500.
James Coen				Person or
PO Box 14				Business
Stockbridge VT 05772	2	N/A	travel/scholarship	500.
Jessi_Kuzmicki	-		.	Person or
508 Schenkar Rd.	-			Business
<u>Pownal</u> <u>VT 05261</u>	-	N/A	travel/scholarship	1,000.
Katie Utter	-	ļ		Person or
PO Box 1118	-			Business
Pittsford VT 05763 Liam McKim		N/A	travel/scholarship	Person or
664 Lost Nation Rd.	-	!		Business
East Haven VT 05837		N/A	travel/scholarship	750.
Logan_Slattery		1476	craver/ senoral snip	Person or
334 Plantation rd.	-			Business
Franconia NH 03580		N/A	travel/scholarship	1,000.
Marina Skripnichuk		1		Person or
7 World Cup Circle	_			Business
South Londonderry VT 05155		N/A	travel/scholarship	500.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year Matt Wilson				Person or
289 Locust Ridge Rd	\			Business
East Burke VT 05832	ļ	N/A	travel/scholarship	1,000.
Megan Ahearn				Person or
15 White Rd.		 		Business
Ringwood NJ 07456		N/A	travel/scholarship	500.
Shamus McKim				Person or
664 Lost Nation rd.				Business
East Haven VT 05837		N/A	travel/scholarship	750.
Thomas Shantler				Person or
320 Reist St.				Business
Buffalo NY 14221		N/A	travel/scholarship	500.
Tommy Kenosh				Person or
401 Pennock Lane				Business
Rutland VT 05701		N/A	travel/scholarship	1,000.

Total

15,750.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LER CPA	tax preparation	480.	480.	480.	

Total 480. 480. 480.

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value	
American Cap Inc Builder	29,618.	38,751.	
Pimco Total Return	36,761.	36,526.	
Pimco High Yield Fund	16,153.	17,090.	
T Rowe Price Equity Income Fund	21,416.	32,616.	
Money fund	2,749.	2,749.	

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

Ishares Select Dividend

Continued

31,316.

29,666.

	End of	Year
Line 13 - Investments - Other:	Book Value	Fair Market Value
Ishares Edge MSCI Min Vol GBL	14,807.	15,552.
Ishares Edge MSCI Min Vol USA	14,890.	15,708.

Total 166,060. 190,308.